


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2006 8:00 am
Secretary of State

01-26-2006 90047 006 ****61.25


DOCUMENT # N03000008430

1. Entity Name
KIDZ IN MOTION, INC.



Principal Place of Business 5424 CONWAY PTE CT ORLANDO, FL 32812	Mailing Address 5424 CONWAY PTE CT ORLANDO, FL 32812
--	--

DO NOT WRITE IN THIS SPACE



01202006 No Chg-NP CR2E037 (11/05)

4. FEI Number 77-0610114	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MAZZOCCO, CAROL S
5424 CONWAY PTE CT
ORLANDO, FL 32812

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MAZZOCCO, CAROL S 5424 CONWAY POINTE COURT ORLANDO, FL 32812
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SAVAGE, JAMES 6404 S. BOSTON STREET P.O. Box 300642 GREENWOOD VILLAGE, CO 80111 Denver, CO 80203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KATZ, SUSAN 6 MANOR RD. N GREENLAWN, NY 11740
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD JAMES, MIKE 1228 CHESSER DRIVE HUNTSVILLE, AL 35803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carol S. Mazzocco **CAROL S. MAZZOCCO** 1/20/06 407-902-1043

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #